FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

316138

SEMINOLE GARDENS APARTMENT NO 15-D, INC.

Principal Place of Business 8330 112TH ST. N.

Mailing Address

8330 112TH ST. N.

FILED Mar 23 1998 8:00am Secretary of State



US		SEMINOLE PL 34042				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
- 5:						04/24/1967			
2. Principal Place of Business		2a. Mailing Address				4, FEI Number	- 	plied For	
Suite, Apt #, etc.		Suite, Apt. #, etc.				59-1207017		t Applicable	
22		27				5. Certificate of Status Desired	\$8.75 A		
City & State		City & State				6. Election Campaign Financing		`	
23		28			Trust Fund Contribution	\$5.00 Added t			
Zip	Country	Zip	Cou	untry		8. This corporation owes or has paid the curr			
24	25		30			· _ · · · ·] No	
g. Name and Address of Current Registered Agent						10. Name and Address of New Registered A	gent		
Castles, Robert G.				81	Name				
8330 112TH ST N				82	Street Add	ress (P.O. Box Number is Not Acceptable)			
SEMINOLE FL 33772									
				83					
				84	City		85 Zip (Code:	
11 Pursuant to the nr	ravisions of Sections 607.0502 a	and 607 1509 Florido Statuto	o tho o	DO: 10	named sar	FL.			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE									
				egistered Agent signature require					
12.		DELETE	13.	Ti F		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR: Change		
1	BITLER, BETTIE			1.1 TITLE			Change	Addition	
	l acconiums amos		1.2 NAME						
	SEMINOLE FL		1.3 STREET ADDRESS		1				
TIPLE V	V DELETE			1.4 CITY - ST - ZIP 2.1 TITLE			Change	Addition	
•	CORBEN. EVELYN			2.2 NAME		•	oracide		
	112TH ST. NORTH		2.3 STREET ADDRESS		DORESS				
F 27.77	INOLE FL		2.4 CITY-ST-7						
TITLE V	V DELETE			3.1 TITLE			Change	Addition	
HAN HAN	IKIN, AMY		3.2 N/			•			
	112TH ST. NORTH				DDRESS			İ	
CITY-ST-ZIP SEM	INOLE FL		3.4. C	ITY-ST	- ZIP				
TITLE ST		☐ DELETE	4.1 TF	TLE			Change	Addition	
NAME KAN	KANSCHAT, ELFRIEDA		4. 2 N	4. 2 NAME					
	8330 112TH ST. NORTH		4.3 ST	4.3 STREET ADDRESS					
CITY-ST-ZIP SEM	SEMINOLE FL		4.4 CI	4.4 CITY - ST - ZIP					
TITLE	P DELETE		5.1 TI	5.1 TITLE			Change	Addition	
	BITLER, NELSON		5.2 NA	5.2 NAME				ŀ	
	8330 112TH ST. NORTH		5.3 ST	5.3 STREET ADDRESS					
CITY-ST-ZIP SEM	SEMINOLE FL		5.4 CI	5.4 CITY - ST - ZIP					
TITLE		☐ DELETE	6.1 TI	TLE			Change	Addition	
NAME			6.2 NA	AME	Ì			1	
STREET ADDRESS			6.3 ST	REET A	DORESS				
CITY-ST-ZIP			6.4 CF	TY-ST-	ZIP				

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the occiproration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Relian & Bitles

3/10/98

813/393-7502